



# APPLICATION FOR EMPLOYMENT

## *An Equal Opportunity Employer*

The city of Trotwood complies with Equal Employment Opportunity (EEO) laws and regulations. Furthermore, the City of Trotwood considers qualified applicants for positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or military/veteran status, genetic information, or sexual orientation.

**PLEASE COMPLETE ALL SECTIONS AND EACH QUESTION COMPLETELY AND ACCURATELY**

- This employment application is to be used for all internal, external, and seasonal or temporary job postings. We encourage you to provide a resume and cover letter in addition to this application. If you require special accommodations to participate in the application or selection process due to disability, please contact Human Resources at (937) 854-7223 or 854-7224.
- Applications are kept on file for at least one year.
- A separate application must be submitted for each position for which you are applying.
- Applications must specifically reflect all requirements for the position, including experience and/or required courses of study. Please answer all questions accurately and completely.
- By signing this application, you are affirming that all information you provide is accurate and complete.
- Falsifying information may be grounds for disqualification and/or termination, if employed in the future.

Position Applied for:						Date:
How did you hear about us?	<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Relative	<input type="checkbox"/> School	<input type="checkbox"/> Inquiry	
	<input type="checkbox"/> Other					
Shift Available:	<input type="checkbox"/> 1st	<input type="checkbox"/> 2nd	<input type="checkbox"/> 3rd	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time	<input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal <input type="checkbox"/>

## Applicant Information

Full Name: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address Apartment/Unit #

\_\_\_\_\_  
City State ZIP Code

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Date Available: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Desired Salary: \$ \_\_\_\_\_

Are you at least 18 years of age?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Are you a U.S. citizen, or legally authorized to work in the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for the City of Trotwood?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, when?	_____	
Do any of your friends or relatives work here? If yes, give name and relationship.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	_____		
Are you currently employed?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	May we contact your current employer?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Are you on layoff, and subject to recall?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			



**Company:** \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES NO

**Company:** \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES NO

**Company:** \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES NO

**Other Qualifications/Specialized Training/Skills**

List any additional information covering your qualifications including any licenses or professional certificates that you hold which are applicable for this position such as typing skills, Office Equipment, Computer Software, fluency in languages other than English, and any heavy equipment/tool skills:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Police Applicant: OPOTA Certified  Yes  No

Currently Enrolled in Police Academy  Yes  No List the expected graduation date \_\_\_\_\_

**Fire Applicant:**

EMS: Level \_\_\_\_\_ Certification # \_\_\_\_\_

FIRE: Level \_\_\_\_\_ Certification # \_\_\_\_\_

If not certified as a Paramedic or a Level II Firefighter, provide the date expected to receive certification \_\_\_\_\_

**Professional References**

*Please list three professional references (not related to you)*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**Applicant's Statement**

*I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This application for employment shall be considered active for a period of time not to exceed one (1) year. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.*

*I hereby understand and acknowledge that any employment relationship with the City of Trotwood is of an "at will" nature, and means that I (as an employee if hired) may resign at any time and the Employer may discharge me with or without cause. It is further understood that this "at-will" employment relationship may not be changed by any written document or by conduct unless an authorized executive of this organization specifically acknowledges such change in writing. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in immediate discharge. I also understand that I am required to abide by all rules and regulations of the employer.*

*I hereby acknowledge that I, voluntarily and of my own free will, have applied for employment with the City of Trotwood with the understanding that the City may use a variety of screening procedures to evaluate my qualifications and suitability for appointment. I have been advised that these screening procedures might include, but are not limited to interviews, criminal record checks, consumer credit reports, driving record checks, polygraph examinations, written testing, reference checks, background investigations, drug/alcohol testing, and other physical and mental assessments used to evaluate whether I am capable of performing the requirements of the position for which I am applying. However, no screening procedures will be implemented to compile or assess my genetic information or used for any discriminatory purpose.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**Applicant's Waiver & Authorization to Release Information**

As an applicant for employment with the City of Trotwood, I understand and agree that the City of Trotwood may make a thorough investigation of my past employment, education, credit history, criminal record, driving record and other activities related to the selection process.

I, \_\_\_\_\_ hereby release the City of Trotwood, its employees, agents and representatives and all others from any liability or damages which may result from the exchange of the information requested.

I also authorize and request all persons to whom this request is presented, having information relating to or concerning me, to furnish such information to a duly appointed representative of the City of Trotwood.

I also release persons, agents, representatives and others providing such information from any damages or liability which may result in the provision of requested information.

I am aware that this information may be of a personal nature and may otherwise be protected from disclosure by my constitutional, statutory, or common law privileges. I hereby expressly waive all privileges, which may attach to such communication or disclosure and release all persons, firms, and corporations from all claims, of any nature, as a result of said communications or disclosure.

Information to be disclosed may include: **(Please initial each blank line)**

- Past/Present Employment Information \_\_\_\_\_
- Educational Background \_\_\_\_\_
- Criminal Record \_\_\_\_\_
- Credit History \_\_\_\_\_
- Driving Record \_\_\_\_\_
- Drug Screen \_\_\_\_\_
- Full Time Police/Fire Applicants only: Polygraph Examination \_\_\_\_\_
- Full Time Police/Fire Applicants only: Psychological Examination \_\_\_\_\_
- Full Time Police/Fire/Public Works Applicants: Physical Examination \_\_\_\_\_

These records will be maintained on file in the Human Resources Department.

\_\_\_\_\_  
Name of Applicant (Please Print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

This signed release will expire in conjunction with applicable eligibility lists for employment or 12 months from date of signature, whichever is greater. Eligibility lists may be extended beyond 12 months if approved by the Trotwood Civil Service Commission.



**AUTHORIZATION TO OBTAIN CONSUMER CREDIT REPORT(S)  
PURSUANT TO 15U.S.C. 1681 (b) (a) (b) (2).**

**I hereby authorize the release of a consumer report for employment purposes to the City of Trotwood. I understand that inquiry may include, but is not limited to: my credit history, criminal arrest and conviction history, motor vehicle records, and credit check (with no impact to credit scores).**

A photocopy or fax copy of this authorization shall be effective as the original. This authorization will remain in force until I specifically revoke it in writing. This authorization is given pursuant to the Fair Credit Reporting Act, 15 U.S.C. 1681.

\_\_\_\_\_  
Name of Authorizing Consumer  
(Printed Please)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Authorizing Consumer

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Social Security Number

## EQUAL EMPLOYMENT OPPORTUNITY (EEO) INFORMATION

Thank you for your *voluntary* assistance in our recruitment and EEO compliance and tracking efforts. The information you provide on this page will be used solely for recruitment and EEO purposes in compliance with State and Federal laws and guidelines.

“Race, color, religion, creed, country of origin, ancestry, sex, age, physical disability, political affiliation, or other factors not pertinent to the performance shall not be considered in recruitment, examination, appointment, training, promotion, retention, salary determination or other conditions of employment, except in cases where specific age, sex or physical requirements constitutes a ‘bona fide occupational qualification.’ Discrimination for any of the reasons stated above is, therefore, unlawful and constitutes the denial of civil rights and an affront to human dignity.”

Position applied for: \_\_\_\_\_ Date Applied: \_\_\_\_\_

Name: \_\_\_\_\_ Please Check One: Male \_\_\_\_\_ Female \_\_\_\_\_

- A. \_\_\_\_\_ White (Not Hispanic or Latino): A person having origins in any of the original peoples of Europe, the Middle East or North Africa.
- B. \_\_\_\_\_ Black or African American (Not Hispanic or Latino): A person having origins in any of the black racial groups of Africa.
- C. \_\_\_\_\_ Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
- D. \_\_\_\_\_ Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino): A person having origins in any of the peoples of Hawaii, Guam, Samoa or other Pacific Islands.
- E. \_\_\_\_\_ Asian (Not Hispanic or Latino): A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
- F. \_\_\_\_\_ American Indian or Alaska Native (Not Hispanic or Latino): A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.
- G. \_\_\_\_\_ Two or more races (Not Hispanic or Latino): All persons who identify with more than one of the above five races.
- H. \_\_\_\_\_ Veteran of the United States military, including Reserves or National Guard
- I. \_\_\_\_\_ Person with disabilities: a physical or mental impairment that substantially limits one or more major activities, including the functions of caring for one’s self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working; a record of a physical or mental impairment, or being regulated as having a physical or mental impairment.



Dear Police Department Applicant:

On behalf of the City of Trotwood, I would like to thank you for your interest in becoming a member of the Trotwood Police Department. Please complete the supplemental application in as much detail as possible. When you return your supplemental application, you must include the following documentation if it applies to you:

- Certified Copy of your Birth Certificate
- Certified Copy of Your High School Diploma or GED Certificate or Certified Transcript
- Certified Copy of your College Transcript and a regular copy of your College Degree
- Copy of your Ohio Peace Officer Training Council Certification
- Copy of Training Certificates related to law enforcement duties.

Your failure to complete the application or to provide the requested documentation may prevent any further processing of you as a candidate for employment.

The selection process includes the ability to successfully pass:

- Written entry-level examination
- Oral Interview/s
- Background investigation including a pre-employment truth verification examination and drug screen
- Psychological examination
- Pre-employment physical examination including a drug screen

Reconsideration, re-evaluation and re-testing are subject to the following constraints:

- Candidates must observe a twelve (12) month waiting period before being eligible for re-testing.
- Candidates may retest the written, oral, and / or physical testing components.
- The psychological testing component and background investigation are not eligible for re-testing or reconsideration for a period of three years.

The entire selection process may take from two months to one year, depending on operational needs. Please direct questions to the Human Resource Department (937) 837-7771.

Thank you again for your interest in the Trotwood Police Department.



# *Trotwood Police Department*

## **EMPLOYMENT APPLICATION SUPPLEMENT – POLICE OFFICERS**

The following questions are in addition to those requested on the original employment application. These questions may be used in a pre-employment truth verification examination. Please answer all questions. If explaining an answer please state the relevant question it applies to on an attached sheet.

### **Financial Information** (Please explain any responses of yes on an attached sheet).

- 1[  ] Yes [  ] No            Are you now delinquent in any financial obligations?
- 2[  ] Yes [  ] No            Do your monthly bills exceed your take home pay?
- 3[  ] Yes [  ] No            Do you or your spouse have any civil actions pending?
- 4[  ] Yes [  ] No            Are you delinquent in child support payments?
- 5[  ] Yes [  ] No            Have you ever been garnished, filed for bankruptcy, or been declared bankrupt?

### **Employment** (Please explain any responses of yes on an attached sheet).

- 6[  ] Yes [  ] No            Have you ever been discharged or asked to resign from a job?
- 7[  ] Yes [  ] No            Have you ever filed a workmen's compensation claim?
- 8[  ] Yes [  ] No            Have you ever been tardy (late) to work?
- 9[  ] Yes [  ] No            Have you ever been disciplined for sick leave abuse/infractions?
- 10[  ] Yes [  ] No            Have you ever received any disciplinary action (verbal or other) at work?

### **General Information** (Please explain any responses of yes on an attached sheet).

- 11[  ] Yes [  ] No            Have you ever been involved in a physical altercation while at work?
- 12[  ] Yes [  ] No            Have you ever threatened to harm another person for reporting your performance deficiencies to your supervisor?
- 13[  ] Yes [  ] No            Have you ever solicited someone to commit a crime or violent act?
- 14[  ] Yes [  ] No            Have you ever violated a company policy in exchange for a bribe or payoff?
- 15[  ] Yes [  ] No            As an adult, have you ever stolen anything?
- 16[  ] Yes [  ] No            Have you ever received or filed for compensation (ADC, General Assistance, etc.) that you were not legally eligible or entitled to receive?
- 17[  ] Yes [  ] No            Have you ever knowingly bought or sold stolen property?
- 18 [  ] Yes [  ] No            Have you ever used any illegal narcotics, at any time?  
*(see reverse side)*

Revised July 18, 2022

- 19[  ] Yes [  ] No      Have you ever used a hallucinogen (including marijuana)?
- 20[  ] Yes [  ] No      Have you ever abused the use of drugs? This includes using any over the counter or prescribed medication for any purpose other than the purpose for which they were intended.
- 21[  ] Yes [  ] No      Have you ever been involved in glue sniffing or used any other such chemical agents for the purpose of obtaining a state of intoxication?
- 22[  ] Yes [  ] No      Do you drink alcohol?
- 23[  ] Yes [  ] No      Do you have any problems because of gambling?
- 24[  ] Yes [  ] No      Do you have any problems controlling your temper?
- 25[  ] Yes [  ] No      Do you have any hatreds or prejudices toward others because of their race, sex, national origin, religion, or color that would be detrimental to you performing your job?
- 26[  ] Yes [  ] No      Have you ever been involved in an automobile accident?
- 27[  ] Yes [  ] No      Have you ever had your driver's license suspended or revoked?
- 28[  ] Yes [  ] No      If it became necessary in the course of your duties to take a human life, would you have any reluctance to do so?
- 29[  ] Yes [  ] No      Have you ever lied under oath or in an investigation, as a police officer/as an employee or as a representative of an employer?
- 30[  ] Yes [  ] No      Have you ever knowingly filed a false report or made false statements on an official document?
- 31[  ] Yes [  ] No      Have you ever abused your authority?
- 32[  ] Yes [  ] No      Did you intentionally omit information from your employment application?
- 33[  ] Yes [  ] No      If a police officer, have you ever used excessive force against another?
- 34[  ] Yes [  ] No      If a police officer, have you ever used your position for personal financial gain?
- 35[  ] Yes [  ] No      Have you ever been involved in a Domestic Violence incident?

- If yes to any of the above please explain with an attached sheet.
- An applicant may not be hired as a peace officer in the City of Trotwood due to any disqualifying offense which would preclude an individual from performing the functions of a peace officer, including any offense under section [2923.13](#) of the Revised Code.
- **An applicant that makes false statements during the selection process, including the application and pre-employment information shall be disqualified.**

## Disqualifying Offenses

Traffic Offenses: Any applicant currently under suspension or revocation of driving privileges will be disqualified. Any applicant with (6) six or more points on their current record, or with a prior suspension or revocation may be disqualified. No applicant will be eligible for appointment as a sworn member unless that person possesses a valid Ohio driver's license.

### **2923.13** Having weapons while under disability.

- (A) Unless relieved from disability under operation of law or legal process, no person shall knowingly acquire, have, carry, or use any firearm or dangerous ordnance, if any of the following apply:
- (1) The person is a fugitive from justice.
  - (2) The person is under indictment for or has been convicted of any felony offense of violence or has been adjudicated a delinquent child for the commission of an offense that, if committed by an adult, would have been a felony offense of violence.
  - (3) The person is under indictment for or has been convicted of any felony offense involving the illegal possession, use, sale, administration, distribution, or trafficking in any drug of abuse or has been adjudicated a delinquent child for the commission of an offense that, if committed by an adult, would have been a felony offense involving the illegal possession, use, sale, administration, distribution, or trafficking in any drug of abuse.
  - (4) The person is drug dependent, in danger of drug dependence, or a chronic alcoholic.
  - (5) The person is under adjudication of mental incompetence, has been adjudicated as a mental defective, has been committed to a mental institution, has been found by a court to be a mentally ill person subject to court order, or is an involuntary patient other than one who is a patient only for purposes of observation. As used in this division, "mentally ill person subject to court order" and "patient" have the same meanings as in section 5122.01 of the Revised Code.
- (B) Whoever violates this section is guilty of having weapons while under disability, a felony of the third degree.
- (C) For the purposes of this section, "under operation of law or legal process" shall not itself include mere completion, termination, or expiration of a sentence imposed as a result of a criminal conviction.

Amended by 130th General Assembly File No. TBD, HB 234, §1, eff. 3/23/2015.

***PLEASE READ EACH STATEMENT  
CAREFULLY BEFORE SIGNING***

I certify that all information provided in this employment application is true and complete. I understand that any false statement or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize and agree to cooperate in a thorough investigation of all statements made herein and other matters relating to my background and qualifications. I understand that any investigation conducted may include a request for employment and educational history, credit reports, consumer reports, investigative reports, driving records, and criminal history.

I understand that compliance with the City of Trotwood Police Department's Code of Conduct and General Orders is a condition of my employment.

I understand I will be required to successfully pass a drug screening examination.

I understand that all application materials are subject to investigation.

\*\*\*\*\*

My signature below acknowledges that I have read and understand the above statements.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Name of Applicant Printed

\_\_\_\_\_  
Date Signed

**\*\*PLEASE SUBMIT WITH APPLICATION\*\***

# LATERAL HIRE APPLICATION – WAIVER AND RELEASE

I, \_\_\_\_\_, am making application to become a police officer for the Trotwood Police Department. I am currently employed as a \_\_\_\_\_ of and for the \_\_\_\_\_.  
(Current Job Title) (Current Government Organization).

I fully understand that the Trotwood Police Department will perform a complete and thorough Background Investigation to ensure that I have the necessary skills, abilities and integrity to perform as a Police Officer of and for the Trotwood Police Department. I recognize and understand that this Background Investigation will include but not be limited to personal history (including credit history if deemed necessary), usage of illegal drugs, criminal misconduct, domestic violence, immoral behavior and any other behaviors deemed inappropriate by the Trotwood Police Department. I also fully understand that information learned by the Trotwood Police Department may result in my not being hired.

Recognizing all of the above, I hereby give the Trotwood Police Department full and complete permission to use this information in making employment decisions and to also disclose the findings and results of this comprehensive background investigation to my current employer, \_\_\_\_\_.  
(Current Government Organization).

I understand that this disclosure may result in adverse consequences for me in my current job, including but not limited to termination from employment, negative reference for future employment, and possible criminal prosecution. I agree to release and hold the City of Trotwood, its employees, elected and appointed officials, and agents, including but not limited to members of the Trotwood Police Department harmless from any and all claims made by or on behalf of me as a result of this use and/or release of information.

I have signed this Waiver at the bottom of this page. I fully understand this waiver, and have been offered the opportunity to withdraw my application for employment with the Trotwood Police Department.

\_\_\_\_\_  
Current Employer

\_\_\_\_\_  
Address of Current Employer

\_\_\_\_\_  
Current Department Head

\_\_\_\_\_  
Phone Number of Department Head

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_ PM / AM.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Witness



**POLICE OFFICER APPLICANT’S WAIVER TO RELEASE INFORMATION**

I hereby authorize and request all persons to whom this request (original and/or reproduction) is presented, having information relating to or concerning me, to furnish such information to a duly appointed officer of the Trotwood Police Department.

I am aware that this information may be of a personal nature and may otherwise be protected from disclosure by my constitutional, statutory, or common law privileges. I hereby expressly waive all privileges, which may attach to such communication or disclosure and release all persons, firms, and corporations from all claims, of any nature, as a result of said communications or disclosure.

Information to be disclosed:

- Medical Records
- Mental Health Records
- Financial Records
- Criminal History Records
- Educational Records
- Organizational Memberships
- Past / Present Employment Records
- Polygraph and/or Truth Verification and/or Psychological Tests Results
- Any Background Material Relevant to my potential employment

These records will be retained on file in the City of Trotwood Personnel Department.

These records may be released / mailed / faxed to the attention of the **Trotwood Human Resources Department, 3035 Olive Road, Trotwood, Ohio 45426, Fax Number (937-854-5045).**

\_\_\_\_\_  
Name of Applicant Printed / Date of Birth

\_\_\_\_\_  
Signature of Applicant Waiving / Date Signed

\_\_\_\_\_  
Signature of Witness / Date Signed